

# ● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : 09/707225 Examiner : ParthasarathyGAU : 2136

From: PAP Location: (IDC) FMF FDC Date: 12/13/05

Tracking #: EPM 09/707225 Week Date: 12/5/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>10/11/05</u>	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	<u>11/28/05</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Renumbered claims 4,5 (original claims 7,8) depend on cancelled original claim 6. Please advise.

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\_\_\_\_\_

Thank you.

[XRUSH] RESPONSE: Both, Claims 4 and 5, now depend on claim 1. Please amend the claims. Thank you.

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12/29/05

**INITIALS:**

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04